

Food Handlers Registration Form

Course Information	
COUNTY	Angelina
CLASS DATE	
INSTRUCTOR	Joel Redus
COST	\$20.00

Participant Information (Please Print Clearly) - \$5 WILL BE CHARGED FOR A NEW CORRECTED CARD TO BE SENT TO YOU. CARDS RETURNED TO US WILL NOT BE RE-MAILED, UNLESS WE ARE CONTACTED. THANK YOU.	
NAME:	
MAILING ADDRESS:	
CITY, STATE, ZIP	
PHONE #:	
EMAIL:	
ESTABLISHMENT:	
RECEIPT #:	Circle One - CHECK or MONEY ORDER

NO CASH ACCEPTED! Please make check or money order payable to:

FPM Account # 230202